Our recently achieved tentative agreement is a tremendous step forward for our profession, our patients, and ourselves. Not only did we have no “givebacks,” but also we made progress in every one of the core areas identified by our members, most notably by achieving strong, enforceable nurse-to-patient ratios in our contract. Below are the agreements reached at the Global Table.

1. **Four Year Agreement**: January 1, 2019 to December 31, 2022

2. **Industry Leading Wages**: This contract ensures that we continue to be the top paid nurses in New York and among the highest paid in the nation.
   
   a. **Minimum of 12.55% wage increases over four years**: All members will receive 3% per year on the base pay for each year of the contract (12.55% compounded over 4 years), making sure that we continue to have top wages. For example, a CN-1 at Step 3 at Presbyterian, who is today earning $95,028 will, with annual increases and experience increases, be making $112,529 on 1/1/22.
   
   b. **Full Retroactivity**: While our contract expired in December, our wage increases go back to that date, meaning the average full time RN will receive a retro check of around $1000.

3. **Fully Funded Pension and Benefits**: We secured from management full funding for the next four years of our agreement of our pension and health benefit funds.

4. **Breakthrough* on Retiree Health from Age 60 to 65**
   
   Effective 1/1/2020, retirees with 20 years of service will be eligible to continue full NYSNA Benefit Fund health coverage until Medicare eligibility;
   
   Window period available for people who retired or will retire between January and May 2019 to qualify effective 1/1/2020;
   
   NYSNA retiree health coverage includes spouse/partner, dependents and dental and vision benefits;
   
   It is expected that there will be no premium contributions based on actuarial projections, but if the costs are unexpectedly high, the parties will meet to address the issue.
   
   Employer enhanced Montefiore’s retiree health program by $1.3 million each year, totaling $5.2 million.

5. **Breakthrough on Staffing**: Minimum staffing ratios/grids in the form of unit specific staffing grids will be in the contract.
   
   a. **Enforcement**: Staffing grids will be fully enforceable by a jointly appointed third party neutral
      
      i. Process for modifying agreed upon staffing grids to account for census and acuity changes will also be subject to binding decision by the third party neutral;
      
      ii. The enforcement process will be much faster than arbitration – disputes will go to mediation within 72 hours, referred for a decision within 72 hours, and the third party neutral will decide the dispute within 5 days – disputes can be resolved within 11 days.
   
   b. **Allocation of Positions**: The joint committees will decide how to allocate the additional new hires on the staffing grids, improve existing ratios/ grids, and supervise filling of vacancies, with any disputes referred to the third party neutral for a binding decision.
   
   c. **Creation and/or enhancement of ratios for every unit in every facility**: The hospital will expeditiously fill all vacancies and vacant positions will not be counted against the required new FTE hires.
   
   d. **Maintenance of Ratios/Grids**: Grids/Ratios must be maintained regardless of future vacated positions due to retirement, resignation, termination, or transfer.
   
   e. **Adjusted Grids/ Ratios**: As additional positions are added to units, resulting improvements to the units’ grid/ratios will be added to the contract.
   
   f. **New Units**: Units without ratios or future newly created units without ratios on a grid (e.g. E.D.s) will establish ratios based on the numbers of new FTEs combined with current FTEs and added to the contract.
   
   g. **Mandatory Filling of all Vacancies**: For the first time at NYSNA, all vacancies must be filled upon ratification. In 2019, 807 FTE current vacancies throughout all facilities equaling $121 million must be posted and filled, and then $25 million is allocated each year for additional positions. This means nearly 1000 new nurses will be initially hired.
   
   h. **$100 Million Committed to New RN Positions over 4 years**: $25 Million per year will be divided across the systems each year, which will be used to improve and enhance ratios/grids in the contract.

6. **Workplace Violence and Safety**: Strengthened safe patient handling language and creation of an active shooter policy for those facilities that did not already have one.

7. **Disaster Relief Language**: Created new language, allowing nurses to take leave to participate in global or national disasters.

8. **Additional Funding for Member Priorities in Year 4**:
   
   a. In the 4th year of the contract, each Hospital System will provide an additional $2.3 million (7 million dollars total) to be available to address bargaining unit priorities;